

This application must be filled out completely. Falsification of any information is grounds for revocation of hunting, fishing, and/or dog training privileges. **PLEASE PRINT ALL INFORMATION.**

APPLICATION FOR: ☐ HUNTING ☐ FISHING ☐ DOG TRAINING (ONLY)

CHECK IF: ☐ ACTIVE MILITARY ☐ RETIRED MILITARY

LAST NAME	FIRST NAME	MIDDLE NAME

DATE OF BIRTH	SSN	HOME PHONE	WORK PHONE

EMERGENCY CONTACT NAME	RELATIONSHIP	PHONE

STREET ADDRESS	APARTMENT NUMBER

CITY	STATE	ZIPCODE

DRIVERS LICENSE NUMBER	STATE	AUTO TAG NO.	STATE

HUNTER SAFETY CERTIFICATE (MANDATORY FOR HUNTERS 12 YEARS AND OLDER)

STATE	NUMBER (IF AVAILABLE)						
-------	--------------------------	--	--	--	--	--	--

VIRGINIA HUNTING/FISHING LICENSE NUMBER							

MIGRATORY BIRD HUNTER HIP NUMBER												

FOR OFFICE USE ONLY

FORT A.P. HILL LICENSE NUMBER					
ISSUE DATE:					
ISSUED BY:					

I have read and understand Post Regulations regarding hunting and fishing and I agree to obey Federal and State of Virginia laws and all Fort A.P. Hill Regulations.

GENERAL RELEASE

For and in consideration of the use of certain premises of the United States of America, to wit, the military reservation indicated above, for the purpose of hunting, fishing, boating, water skiing or other sporting activity, I hereby agree to hold and save harmless and indemnify the United States of America, its officers, agents, servants and employees, from and against liability of any kind for death of or injury to person or damage to or loss of property in any way caused or contributed to by my negligent or wrongful acts or omissions while upon said military reservation. In addition, I do hereby remise, release, and forever discharge the United States of America, its officers, agents, servants and employees from any and all manner of claims, actions, suits, debts, judgments, or demands for damages by reason of injury to my person or damage to or loss of my property while upon said military reservation resulting from whatever cause, including the negligent or wrongful acts of omissions of the United States of America, its Officers, agents, servants, or employees.

I certify that I am at least eighteen (18) years of age.

I HAVE READ AND UNDERSTAND THE ABOVE

SIGNATURE OF APPLICANT	DATE	WITNESS INITIALS

Underage hunters/anglers/dog trainers must have their parent or legal guardian sign the statement below:

I, _____ as legal parent/guardian of _____, do hereby enter into the above agreement on his/her behalf.

PRIVACY ACT NOTICE

This information is provided pursuant to AR 420-47 for individuals applying for permits to participate in various recreational activities. 10USC 3012 authorizes the collection of data from individuals when applying for hunting, fishing, recreation services, and other outdoor activities permits. It is used to obtain a general release statement for individuals using privileges on government property at Fort A.P. Hill. Disclosure is voluntary. Failure to provide information will result in denial of post privileges.